



## EMOTION-FOCUSED COPING STYLE AMONG ADOLESCENT GIRLS: ROLE OF ANXIETY, DEPRESSION AND PERSONALITY

### Psychology

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### ABSTRACT

An attempt was made in the present investigation to study the role of anxiety, depression and personality on emotion- focused coping style in a sample of 400 adolescent girls selected randomly in the age group of 14-17 years, studying in secondary schools of Chittoor district of A.P. Data were collected by using Anxiety scale (Sinha, 1989), Depression Scale (Karim and Rama Tiwari, 1986), Personality Inventory (Williams, 1998) and Coping Styles scale (Kumar and Sreenivas, 1998). A 2X2X2 factorial design was employed. ANOVA was used to analyze the data. The findings of the study revealed that anxiety and personality have significant influence on emotion- focused coping styles among adolescent girls. Adolescent girls with type-A personality and low anxiety have used emotion- focused coping style more frequently than the girls with type B personality and high anxiety. Depression has no significant influence on emotion- focused coping style among adolescent girls.

### KEYWORDS

Emotion-focused coping style, of Anxiety, Depression, Personality and Adolescents

### INTRODUCTION

Adolescence is a time of many life changes. How adolescents cope with these changes is a topic of much concern to parents, teachers, and to society as a whole. Adolescence is an important transitional time with biological and social changes. During adolescence there is a heightened risk of internalized and externalized problems such as, anxiety, depression, suicide, substance misuse, and conduct disorders. Some will navigate this challenging time with great mastery, while others may experience confusion, self-doubt, and distress. Protective factors or personal resources such as, parent and peer support, social and academic competence, and self-esteem can help navigate the transition with success.

The most common sources of day-to-day stress for adolescent girls are school-related problems or pressures; problems with peers, family issues or problems with parents; their own thoughts, feelings, or behaviors, for instance feeling depressed or lonely, physical changes, getting into trouble because of their behavior.

The term "coping" refers broadly to efforts to manage environmental and internal demands and conflicts among demands (Lazarus, 1966). Folkman and Lazarus (1980) defined coping as the cognitive and behavioral efforts made to master, tolerate or reduce external and internal demands and conflicts among them.

The conceptualization of emotion-focused coping was introduced by Lazarus and Folkman (1984) in the framework of their cognitive model of stress and coping. Coping modes can be expressed in a variety of behaviors and cognitions conceptualized as coping strategies. Emotion-focused coping can include such strategies as wishful thinking; distancing, emphasizing the positive, self-blame, and self-isolation (Lazarus and Folkman 1984). Carver et al. (1989) viewed emotion-focused coping as including an even larger number of coping strategies: seeking support for emotional reasons, focusing and venting of emotions, mental and behavioral disengagement, positive reinterpretation and growth, denial, acceptance, turning to religion, and alcohol/drug disengagement. Furthermore, some emotion-focused coping strategies offer unlimited ways of coping options. For example, mental disengagement can be attained by diverting attention to another topic, listening to music or a talk on the radio, chatting with a friend, watching television, engaging in sport, etc.

Several attempts were made by researchers to describe factors related to coping styles in adolescent girls. But only a few attempts were made to investigate the psychological factors related to emotion focused coping styles among adolescent girls. It is also noted that only meager and negligible probe has been made to explore the impact of personality, anxiety and depression on emotion focused coping styles adolescent girls in India. The need is strongly felt to explore this complex and intricate problem. Hence the research investigation has contemplated. In view of the above, the present study was planned with the following objective.

To find out the impact of anxiety, depression and personality on emotion focused coping style.

### Hypotheses

In order to realize the objective of the study the following hypotheses were formulated.

1. Personality would significantly influence the emotion-focused coping styles.
2. Anxiety would significantly influence the emotion - focused coping styles.
3. Depression would significantly influence the emotion - focused coping styles

### Method

#### Sample

Sample of the study consisted of 400 adolescent girls in the age group of 14-17 years; studying in government and private schools in Chittoor district of A.P. Technique of simple randomization was employed for the selection of the subjects.

#### Tools

Each subject in the sample was administered the following scales and inventories.

- (1). Anxiety scale (Sinha, 1989), (2). Depression scale (Shamin Karim and Rama Tiwari (1986), (3). Personality inventory (Williams (1998), and (4). Coping styles Scale (Kumar and Sreenivas, 1998).

Instructions pertaining to all these instruments were given in Telugu, the mother tongue of the subjects and the responses were noted by the investigator. In order to verify the information pertaining to the subject, the knowledgeable persons like school teachers were contacted. A test- retest correlation on 30 individuals with an interval of 15 days was found to be 0.84 for anxiety, 0.79 for depression, 0.82 for personality and 0.80 for coping styles. Based on the scores they were classified into students with low anxiety, high anxiety, mild depression and moderate depression and students with type A and B personality in such a way that they fit into a 2X2X2 factorial design.. Thus 400 students constituted the sample of the present study.

### Analysis of Data:

The obtained data have been treated statistically in order to test the hypotheses. The Means and SDs (Standard Deviations) of the scores were calculated. To find out the influence and interaction effect of the variables, the data were subjected to ANOVA (Analysis of Variance).

### RESULTS AND DISCUSSION

An observation of Table-I indicates the mean values of emotional-focused coping Styles. Emotional-focused coping styles include responses whose primary function is to manage the emotions aroused by stressors and there by to maintain affective equilibrium. They involve affective regulation, resigned acceptance and emotional

discharge. Here the individual manages stress by controlling their emotions, accepting the reality and thinking that nothing can be done, discharging emotions, expressing what one wants to say without any excuses, crying when sad, showing others how one cares, able to tell people when hurt, actively pursuing happiness, admitting when afraid of something, expressing feelings clearly like joy or sadness and laughing whole heartedly etc.

**Table-I: Means and SDs for scores on Emotion- focused coping style.**

Depression		Personality			
		Type-A		Type-B	
		Anxiety		Anxiety	
		Low	High	Low	High
Low	Mean	40.35	39.47	38.32	37.25
	SD	8.23	7.72	8.92	7.15
Moderate	Mean	38.64	37.95	39.58	36.41
	SD	8.35	8.06	7.54	8.45

**Grand Means**

Type-A Personality = (M:39.10)  
 Type-B Personality = (M: 37.89)Low Anxiety = (M: 37.78)  
 High Anxiety = (M: 39.22)Low Depression = (M:38.85)  
 Moderate Depression = (M:38.14)

When we look into the means of emotion-focused coping style from the table-I that the girls with type 'A' personality, low anxiety and mild depression obtained a high score of 40.35 indicates that they used emotion focused coping style more frequently compared with other groups. Girls with type 'B' personality, high anxiety and moderate depression obtained a low score of 36.41 indicate that they used emotion coping style less frequently compared to other groups.

When we look into the means of emotion-focused coping style in relation to personality, girls with type 'A' personality (M=39.10) used emotion focused coping style more frequently than the girls with type 'B' personality (M=37.89). In terms of anxiety, girls with high anxiety (M=39.22) used emotion focused coping style more frequently than the girls with low anxiety (M=37.78). In terms of depression, girls with mild depression (M=38.85) used emotion focused coping style more frequently than the girls with moderate depression (M=38.14).

There are differences in the mean scores of the groups related to emotion focused coping style. In order to test whether personality, anxiety and depression have any significant impact on emotion focused coping style of adolescent girls, the data were further subjected to factorial analysis of variance and the results are presented in Table- II.

**Table-II: Summary of ANOVA for scores on emotion-focused coping styles.**

Source of Variance	Sum of Squares	df	MSS	F-Values
Personality (A)	356.323	1	356.323	6.70**
Anxiety (B)	293.402	1	293.402	5.52*
Depression (C)	81.903	1	81.903	1.12@
(A x B)	360.803	1	360.803	6.78**
(A x C)	90.062	1	90.062	1.69@
(B x C)	79.922	1	79.922	1.50@
(A x B x C)	143.103	1	143.103	2.70@
Within	28669.660	392	53.137	--
Total	30075.180	399	--	--

\*\* - Significant at 0.01 level

\* - Significant at 0.05 level @-Not significant

**Hypotheses-1: Personality type would significantly influence emotion- focused coping style among adolescent girls.**

It is evident from table-II that the obtained 'F' value of 6.70 is significant at 0.01 level indicates that personality has significant impact on emotion coping style among adolescent girls. Between type A and Type B personalities, it is the subjects with type A personality who have used emotion- focused coping style more frequently than the subjects with type B personality. As the 'F' value is significant, the hypothesis-4, which stated that *personality would significantly influence emotion- focused coping style among adolescent girls*, is accepted as warranted by the results.

Personality type and coping style has been a topic of interest for many years. People with Type A personality are more likely to be preoccupied with social status, accomplishment in life, self-esteem and often domineering, impatient and prone or quick to anger. Physical characteristics such as facial tension (tight lips, clenched jaw), tongue clicking or teeth gathering, dark circles under eyes, facial sweating (on forehead or on upper lip) often accompany with type A personality. Type A personality was found to be associated with the higher risk developing stress. These people are high achievers and they find it that they have to beat every day and work their butts off to exhaustion. This severe sense of urgency makes them edgy. Relaxation is difficult for them and high levels of stress, impatience and quick anger make the people discharge their emotions.

Individuals with type A personality have been found to have higher levels of norepinephrine a brain chemical associated with the "fight or flight" reaction. These individuals are always in competitive spirit that causes increased activity of sympathetic nervous system which leads to high blood pressure and fail to control their emotions.

In the present investigation the subjects with type A personality tried to overcome their stresses and problems by using emotion focused coping style more frequently than the subjects with type B personality by discharging their emotions. So only there was significant influence of type of personality on emotion focused coping style.

**Hypotheses-2: Anxiety would significantly influence emotion- focused coping style among adolescent girls.**

It is evident from table-II that the obtained 'F' value of 5.52 is significant at 0.05 level indicates that anxiety has significant impact on emotion coping style among adolescent girls. Between high and low anxiety groups, it is the subjects with high anxiety who have used emotion- focused coping style more frequently than the subjects with low anxiety. As the 'F' value is significant, the hypothesis-5, which stated that *Anxiety would significantly influence emotion-focused coping style among adolescent girl*, is accepted as warranted by the results.

The adolescent girls with high anxiety live in a relatively constant state of tension, worry, and diffuse uneasiness. They are over sensitive in interpersonal relationships, and frequently feel inadequate and depressed. Usually they have difficulty in concentrating and making decisions, dreading to make a mistake. Their high level of tension is often reflected in strained postural movements, over reaction to sudden or unexpected stimuli and continual nervous movements. They perspire profusely and palms are often clammy. They may show cardiovascular challenges, such as elevated blood pressure and increased pulse rate, and he may experience heart palpitations for no apparent reason. When they fail to cope automatically discharge their emotions and some times accept the situation and think that nothing can be done and leave it to fate decide by using emotional focused coping styles namely emotional discharge and resigned acceptance. In the present investigation adolescent girls with high anxiety used more of emotional coping styles than the girls with low anxiety.

In Indian scenario adolescent girls are not exposed to society and socialization practices and parental expectations make girls play limited roles. The sense of inadequacy and the feelings of uncertainty and dependency can be observed more in adolescent girls. Naturally they perceive many aspects of their environment as personally threatening, and thus anxiety is elicited which in turn fail to use effective coping styles and go for emotional focused coping styles

Many studies indicated that problem focused coping strategies are associated with less anxiety on the other hand emotion focused ones are associated with high anxiety. Different researches indicate significant gender differences in coping. Prakash and Bhogle (1994) carried out a study on coping styles of female students and found that adolescent girls use more emotion oriented coping styles. And on the contrary psychological distress was significantly related to the use of emotional oriented coping strategies. Another study revealed that girls are more oriented towards social support, tension reduction and use non- productive coping style (Nola Firth, Dary Greaves and Frydenberg, 2010).

**Hypotheses-3: Depression would significantly influence emotion- focused coping style among adolescent girls.**

It is evident from the table-II that the obtained 'F' value of 1.12 is not

significant suggest that depression has no significant impact on emotion coping style among adolescent girls. As the 'F' value is not significant, the hypothesis-6, which stated that depression has significant impact on emotion coping style among adolescent girls, is not accepted as unwarranted by the results. Between the subjects with mild and moderate depression, it is the subjects with moderate depression who have used emotion- focused coping style more frequently than the subjects with mild depression and the difference is not significant.

Billings and Moose (1983) state that the strategy of emotion focused coping implies controlling the emotion around by the problem, by consciously postponing, waiting for time to remedy the problem, expecting the worst, submitting to fate, crying, smoking and overacting. In the present investigation, intensity of depression did not influence the use of emotional focused coping style. Owing to similarity of cultural context, social expectations, parental models, might have influenced the adolescent girl students to use emotional coping styles equally with out much difference.

The manner in which the students cope with their problems generally depends on the knowledge of various ways of solving problems to overcome the stress. It depends upon the habits of coping which the individual has developed over a period of time. These habits would again depend on the opportunities available to them and their general intellectual caliber at the time of coping. More over in the present investigation adolescent girls with mild and moderate depression were studied with out considering the girls with severe depression. These are some of the reasons why the adolescent girls irrespective of intensity of depression used emotion focused coping style equally through affective regulation, resigned acceptance and emotional discharge.

## CONCLUSION

In summary, the present investigation reveals that personality and Anxiety have significant influence on emotion- focused coping style. Adolescent girls with type-A personality and low anxiety have used emotion- focused coping style more frequently than the girls with type B personality and high anxiety. Depression has no significant influence on emotion- focused coping style among adolescent girls.

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